

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
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EFS ID: 19218
Application ID: 10065523
Title of Invention: Mast for Handling a Coiled
Tubing Injector
First Named Inventor: David McCulloch
Domestic/Foreign Application: Domestic Application
Filing Date: null
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Attorney Docket Number: NONE
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Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
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Total Fees Authorized: \$1134.0
Payment Category: DA - Deposit Account
Deposit Account Number: 134900
Deposit Account Name: Marc A. Hubbard

TRANSMITTAL FORM

Electronic Version 1.0.3

Stylesheet Version: 1.0

Submission Type: Utility Patent Filing



Mast for Handling a Coiled Tubing Injector

First Named Inventor: Mr. David W. McCulloch

SUBMITTED BY

Name:	Mr. Marc A. Hubbard
Registration Number:	32,506
Electronic Signature Mark: /Marc A Hubbard/	Date Signed: 20021025

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration	declaration1.tif
declaration	declaration2.tif
declaration	declaration3.tif
specification	specification.xml
bibd-transmittal	varco19apds.xml

fee-transmittal
patent-assignments

varco19fee.xml
varco19asn.xml

Attached Image File(s):

declaration1.tif
declaration2.tif
declaration3.tif

Comments:

Practitioner's Docket No. 3810.19

PATENT

COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is for an original application.

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

MAST FOR HANDLING A COILED TUBING INJECTOR

SPECIFICATION IDENTIFICATION

The specification is attached hereto.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 C.F.R. § 1.98.

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)
(35 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER	FILING DATE
60/334,868	October 30, 2001

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

APPOINTED PRACTITIONER(S)	REGISTRATION NUMBER(S)
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I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO

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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

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Inventor's signature

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FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 1134

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 13-4900



Deposit Account Name: Munsch Hardt Kopf & Harr, P.C.

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

SUBMITTED BY

Authorized Name: Marc A. Hubbard
 Electronic Signature Mark: /Marc A Hubbard/
 Date Signed: 20021025

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	1001	\$ 740

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 35	1202	\$ 18	15	\$ 270
Independent Claims: 4	1201	\$ 84	1	\$ 84

Subtotal For Extra Claims Fees: \$ 354

ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Recording Each Patent Assignment Per Property Fee	00000000	1	8021	\$ 40	\$ 40

Subtotal For Additional Fees: \$ 40